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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

Department of the Treasury
Internal Revenue Service

990

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

UNITED STATES OLYMPIC COMMITTEE

% MORANE B KEREK

Doing business as

Number and street (or P O box if mail is not delivered to street address)

1 OLYMPIC PLAZA

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

COLORADO SPRINGS, CO 80909

F Name and address of principal officer

MORANE B KEREK

1 OLYMPIC PLAZA

COLORADO SPRINGS, CO 80909

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

13-1548339

E Telephone number

(719) 866-4823

G Gross receipts \$ 202,583,009

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW TEAMUSA ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1950

M State of legal domicile CO

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

TO SUPPORT UNITED STATES OLYMPIC AND PARALYMPIC ATHLETES

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶5,430,672

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Prior Year

Current Year

Beginning of Current Year

End of Year

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2018-08-30

Date

MORANE B KEREK CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

DANIEL ROMANO

Preparer's signature

DANIEL ROMANO

Date

Check ☐ if self-employed

PTIN P00504182

Firm's name ▶ GRANT THORNTON LLP

Firm's EIN ▶

Firm's address ▶ 757 3RD AVENUE FLOOR 9

Phone no (212) 599-0100

NEW YORK, NY 10017

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

TO SUPPORT U S OLYMPIC AND PARALYMPIC ATHLETES IN ACHIEVING SUSTAINED COMPETITIVE EXCELLENCE WHILE DEMONSTRATING THE VALUES OF THE OLYMPIC MOVEMENT, THEREBY INSPIRING ALL AMERICANS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 100,210,740 including grants of \$ 72,858,930) (Revenue \$ 302,146)
See Additional Data

4b (Code) (Expenses \$ 27,096,869 including grants of \$ 12,673) (Revenue \$ 4,625,312)
See Additional Data

4c (Code) (Expenses \$ 21,872,622 including grants of \$ 2,992,071) (Revenue \$ 5,991,157)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ 32,954,051 including grants of \$ 18,407,644) (Revenue \$ 1,502,320)

4e Total program service expenses ► 182,134,282

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	Yes	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	Yes	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	If "Yes," enter the name of the foreign country: BR, RS See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official.	Yes	
b	Other officers or key employees of the organization.	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NY, ND, OK, OR, PA, RI, TN, VA, WV, WI

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
 ► MORANE B KERK 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 809095746 (719) 866-4823

Check if Schedule O contains a response or note to any line in this Part VII ☒

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 136

Section B. Independent Contractors

(A)	(B)	(C)
Name and business address	Description of services	Compensation
NBC UNIVERSAL MEDIA LLC, 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	BROADCASTING	4,407,056
US ANTI-DOPING AGENCY, 5555 TECH CENTER DRIVE SUITE 200 COLORADO SPRINGS, CO 80919	ANTI-DOPING	4,370,165
ELITE ATHLETE SERVICES LLC, 2800 OLYMPIC PARKWAY CHULA VISTA, CA 91915	TRAINING SITE	3,656,424
SODEXO AMERICA LLC, DEPT 880328 LOS ANGELES, CA 90088	JANITORIAL	956,325
ACCESS EVENT, 406 7TH STREET NW WASHINGTON, DC 20004	LODGING-WINTER GAMES	886,208

Form **990** (2017)

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c				
	d Related organizations	1d	15,155,129			
	e Government grants (contributions)	1e	214,034			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	23,840,321			
	g Noncash contributions included in lines 1a-1f \$		342,436			
	h Total. Add lines 1a-1f ▶		39,209,484			
Program Service Revenue		Business Code				
	2a TEAM USA MEDIA AND PROMOTION	711300	5,991,157	5,902,088	89,069	
	b ATHLETE TRAINING FACILITIES	711300	4,625,312	4,625,312		
	c NGB AND ATHLETE FOUNDATIONAL PROGRAMS	711300	1,498,980	1,498,980		
	d HIGH PERFORMANCE PROGRAMS	711300	302,146	302,146		
	e OLYMPIC AND PARALYMPIC COMPETITIONS	711300	3,340	3,340		
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶		12,420,935			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		2,000,776			2,000,776
	4 Income from investment of tax-exempt bond proceeds ▶		0			
	5 Royalties ▶		123,872,122		44,102	123,828,020
	6a Gross rents	(i) Real (ii) Personal				
		21,910 149,040				
	b Less rental expenses		136,901			
	c Rental income or (loss)	21,910 12,139				
	d Net rental income or (loss) ▶		34,049		12,139	21,910
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		18,713,368 34,944				
	b Less cost or other basis and sales expenses	18,713,368				
	c Gain or (loss)		34,944			
	d Net gain or (loss) ▶		34,944			34,944
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a		0			
	b Less direct expenses b		0			
	c Net income or (loss) from fundraising events ▶		0			
	9a Gross income from gaming activities See Part IV, line 19 a		0			
	b Less direct expenses b		0			
	c Net income or (loss) from gaming activities ▶		0			
	10a Gross sales of inventory, less returns and allowances a		0			
	b Less cost of goods sold b		0			
	c Net income or (loss) from sales of inventory ▶		0			
Miscellaneous Revenue	Business Code					
11a PROFESSIONAL SERVICE FEES	711300	6,141,656			6,141,656	
b MISCELLANEOUS OTHER REVENUE	711300	18,774			18,774	
c						
d All other revenue						
e Total. Add lines 11a-11d ▶		6,160,430				
12 Total revenue. See Instructions ▶		183,732,740	12,331,866	145,310	132,046,080	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	66,582,688	66,582,688		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	27,643,061	27,643,061		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	45,569	45,569		
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	4,913,882	1,163,080	3,160,286	590,516
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	38,549,313	21,189,005	13,472,753	3,887,555
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	2,045,329	1,124,235	714,830	206,264
9 Other employee benefits.	5,257,915	2,753,695	2,021,800	482,420
10 Payroll taxes.	2,458,746	1,231,971	962,858	263,917
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	667,300	41,098	626,202	
c Accounting.	164,248		164,248	
d Lobbying.	102,241		102,241	
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	5,964,581	4,067,403	1,897,178	
12 Advertising and promotion.	156,537	9,780	146,757	
13 Office expenses.	2,460,397	1,283,698	1,176,699	
14 Information technology.	818,991	311,914	507,077	
15 Royalties.	0			
16 Occupancy.	8,911,709	5,454,036	3,457,673	
17 Travel.	9,327,689	7,297,027	2,030,662	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	1,006,238	814,466	191,772	
20 Interest.	0			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	8,606,318	3,795,877	4,810,441	
23 Insurance.	1,353,820	531,181	822,639	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a OUTSIDE SERVICES	10,607,680	7,072,349	3,535,331	
b PUBLIC INFORMATION	6,652,088	6,585,081	67,007	
c REPAIRS AND MAINTENANCE	3,711,919	404,827	3,307,092	
d GAMES AND EVENT EXPENSE	572,172	519,258	52,914	
e All other expenses	5,990,479	22,212,983	-16,222,504	
25 Total functional expenses. Add lines 1 through 24e.	214,570,910	182,134,282	27,005,956	5,430,672
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		158,628,437	2	155,473,413
	3	Pledges and grants receivable, net		15,411,549	3	12,955,874
	4	Accounts receivable, net		40,549,001	4	29,550,917
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		1,668,207	8	1,639,208
	9	Prepaid expenses and deferred charges		4,204,557	9	13,450,664
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	170,846,190		
	b	Less: accumulated depreciation	10b	100,307,348		
				78,054,311	10c	70,538,842
	11	Investments—publicly traded securities		1,006,663	11	1,304,361
	12	Investments—other securities. See Part IV, line 11		0	12	0
	13	Investments—program-related. See Part IV, line 11		996,834	13	996,834
	14	Intangible assets		0	14	0
15	Other assets. See Part IV, line 11		10,853,084	15	10,061,605	
16	Total assets. Add lines 1 through 15 (must equal line 34)		311,372,643	16	295,971,718	
Liabilities	17	Accounts payable and accrued expenses		30,982,546	17	30,878,250
	18	Grants payable		0	18	0
	19	Deferred revenue		29,905,501	19	44,827,131
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		0	25	0
	26	Total liabilities. Add lines 17 through 25		60,888,047	26	75,705,381
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		222,775,915	27	194,780,844
	28	Temporarily restricted net assets		16,480,136	28	14,248,750
	29	Permanently restricted net assets		11,228,545	29	11,236,743
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
33	Total net assets or fund balances		250,484,596	33	220,266,337	
34	Total liabilities and net assets/fund balances		311,372,643	34	295,971,718	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	183,732,740
2	Total expenses (must equal Part IX, column (A), line 25)	2	214,570,910
3	Revenue less expenses Subtract line 2 from line 1	3	-30,838,170
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	250,484,596
5	Net unrealized gains (losses) on investments	5	619,911
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	220,266,337

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 13-1548339
Name: UNITED STATES OLYMPIC COMMITTEE

Form 990 (2017)

Form 990, Part III, Line 4a:

HIGH PERFORMANCE PROGRAMS - NEARLY HALF OF THE USOCS BUDGET IS DIRECTED TOWARD PROGRAMMING AND SERVICES THAT SUPPORT AND IMPACT ELITE ATHLETE PERFORMANCE IN ADDITION TO GRANTS AND REWARDS, THIS INCLUDES ATHLETE HEALTH INSURANCE, SPORTS MEDICINE AND SCIENCE, TALENT TRANSFER, TECH AND INNOVATION, COACHING EDUCATION PROGRAMS, AND PARALYMPIC OUTREACH AND DEVELOPMENT

Form 990, Part III, Line 4b:

ATHLETE TRAINING FACILITIES - THE USOC OPERATES AND PARTNERS WITH A VARIETY OF WORLD-CLASS FACILITIES TO SUPPORT ATHLETES IN THEIR DAY-TO-DAY TRAINING AND DEVELOPMENT THIS INCLUDES OPERATING TWO OLYMPIC TRAINING CENTERS AND SUPPORTING NEARLY 20 PARTNER TRAINING SITES, IN ADDITION TO MORE THAN 50 COMMUNITY-BASED ORGANIZATIONS

Form 990, Part III, Line 4c:

TEAM USA MEDIA & PROMOTION - A VARIETY OF PROGRAMS RELATED TO THE PUBLIC PROMOTION OF TEAM USA, AND THE OLYMPIC AND PARALYMPIC MOVEMENTS TO POSITIVELY IMPACT ATHLETES PERSONAL BRANDING AND SPONSORSHIP OPPORTUNITIES THIS INCLUDES TRADITIONAL AND DIGITAL MEDIA, BROADCASTING INITIATIVES, AND INTERNATIONAL OUTREACH

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LAWRENCE F PROBST CHAIRMAN OF THE BOARD	20 0 1 0	X		X				0	0	0
ROBERT J BACH DIRECTOR	2 0 0 0	X						0	0	0
JAMES M BENSON DIRECTOR	2 0 0 0	X						0	0	0
URSULA M BURNS DIRECTOR (END 1/17)	2 0 0 0	X						0	0	0
CHERI BLAUWET DIRECTOR	2 0 0 0	X						0	0	0
ANITA L DEFRANTZ DIRECTOR	2 0 0 0	X						0	0	0
DANIEL L DOCTOROFF DIRECTOR	2 0 0 0	X						0	0	0
NINA M KEMPEL DIRECTOR	2 0 0 0	X						0	0	0
SUSANNE D LYONS DIRECTOR	2 0 0 0	X						0	0	0
WILLIAM C MAROLT DIRECTOR	2 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN M MESLER DIRECTOR	2 0 0 0	X						0	0	0
DAVE W OGREAN DIRECTOR	2 0 0 0	X						0	0	0
PISEI WHITNEY PING DIRECTOR	2 0 0 0	X						0	0	0
ANGELA M RUGGIERO DIRECTOR	2 0 0 0	X						0	0	0
KEVIN M WHITE DIRECTOR	2 0 0 0	X						0	0	0
ROBERT L WOOD DIRECTOR	2 0 0 0	X						0	0	0
SCOTT A BLACKMUN CHIEF EXECUTIVE OFFICER	32 0 8 0			X				1,309,114	0	49,098
MORANE B KERЕК CHIEF FINANCIAL OFFICER	38 0 2 0			X				296,995	0	42,199
CHRISTOPHER D MCCLEARY GENERAL COUNSEL	40 0 0 0			X				414,718	0	37,272
RICHARD W ADAMS CHIEF OF PARALYMPICS & NGB	40 0 0 0				X			363,284	0	43,064

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RUSSELL C HUEBNER FORMER CHIEF OF PARALYMPICS	0 0 0 0						X	292,852	0	38,435

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
UNITED STATES OLYMPIC COMMITTEE

Employer identification number
13-1548339

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	80,634,567	59,073,719	43,337,284	50,267,953	39,209,484	272,523,007
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	80,634,567	59,073,719	43,337,284	50,267,953	39,209,484	272,523,007
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6	Public support. Subtract line 5 from line 4						272,523,007

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7	Amounts from line 4	80,634,567	59,073,719	43,337,284	50,267,953	39,209,484	272,523,007
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	77,797,180	83,657,081	83,757,476	95,899,578	125,850,706	466,962,021
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	404,231	5,516,086	5,039,632	6,042,946	6,160,430	23,163,325
11	Total support. Add lines 7 through 10						762,648,353
12	Gross receipts from related activities, etc. (see instructions)					12	331,706,676
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	1435.734 %
15	Public support percentage for 2016 Schedule A, Part II, line 14	1524.630 %
16a	33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>	
b	33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
	11a	
	11b	
	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PUBLIC SUPPORT TEST	<p>SCHEDULE A, PART II THE UNITED STATES OLYMPIC COMMITTEE (USOC) IS TAX-EXEMPT UNDER INTERNAL REVENUE CODE (IRC) SECTION 501(A), AS AN ORGANIZATION DESCRIBED IN IRC SECTION 501(C)(3). IT IS RECOGNIZED AS A PUBLICLY SUPPORTED ORGANIZATION UNDER IRC SECTION 170(B)(1)(A)(VI). THE USOC WAS APPOINTED BY CONGRESS AS THE COORDINATING BODY FOR ALL OLYMPIC-RELATED ATHLETIC ACTIVITY IN THE UNITED STATES. SPECIFICALLY, THE USOC OVERSEES ALL ATHLETIC ACTIVITY IN THE U.S. DIRECTLY RELATING TO INTERNATIONAL COMPETITION, INCLUDING THE PROGRAMS FOR OLYMPIC, PARALYMPIC, PAN AMERICAN AND PARAPAN AMERICAN GAMES. THE USOC IS THE NATIONAL OLYMPIC COMMITTEE AND NATIONAL PARALYMPIC COMMITTEE FOR THE UNITED STATES. IN 2017, THE ORGANIZATION RECEIVED MINIMAL GOVERNMENTAL FUNDING. IT THUS RELIES ON ITS ABILITY TO GENERATE REVENUE FOR ITS OPERATIONS THROUGH CONTRIBUTIONS FROM THE GENERAL PUBLIC, ROYALTY REVENUE FROM THE SALE OF OLYMPIC BROADCASTING RIGHTS AND MARKS RIGHTS. THE USOC'S BOARD OF DIRECTORS IS COMPOSED OF 15 VOLUNTEER INDIVIDUALS AND THE CEO AS AN EX-OFFICIO, NON-VOTING MEMBER. THE VOLUNTEER BOARD MEMBERS INCLUDE SIX MEMBERS FROM THE GENERAL PUBLIC, THREE MEMBERS SELECTED FROM THOSE NOMINATED BY THE NATIONAL GOVERNING BODIES COUNCIL, THREE MEMBERS SELECTED FROM THOSE NOMINATED BY THE ATHLETES' ADVISORY COUNCIL, AND ANY UNITED STATES MEMBERS OF THE INTERNATIONAL OLYMPIC COMMITTEE (CURRENTLY THREE AT THE END OF 2017). THE USOC OPERATED TWO TRAINING CENTERS FOR THE BENEFIT OF AMERICAN ATHLETES TRAINING TO BECOME MEMBERS OF VARIOUS UNITED STATES OLYMPIC, PARALYMPIC, PAN AMERICAN, PARAPAN AMERICAN AND YOUTH OLYMPIC TEAMS. THE FACILITIES ARE MADE AVAILABLE TO OTHER NOT-FOR-PROFIT ORGANIZATIONS ON A SPACE AVAILABLE BASIS FOR VARIOUS MEETINGS AND CAMPS/CLINICS. THE USOC IS AN ACTIVE PARTICIPANT IN PROMOTING AMATEUR SPORTS AND PHYSICAL FITNESS IN THE UNITED STATES. THE USOC'S PROMOTION AND AWARENESS CAMPAIGN OF PROMOTING SPORTS AND PHYSICAL FITNESS IS CARRIED OUT THROUGH VARIOUS EDUCATIONAL PROGRAMS, OFTEN IN CONJUNCTION WITH OTHER ORGANIZATIONS. SEE PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS FOR DESCRIPTION OF PROGRAMS THAT ACCOMPLISH THE USOC'S EXEMPT PURPOSE AND MISSION. During 2017, the USOC revised its policy for reporting contributions on the public support test. The revisions take a conservative approach to valuing sponsor revenue contract benefits and includes amounts that meet the definition of contributions on the public support test. BASED ON ITS PROGRAMS, THE USOC CONTINUES TO QUALIFY AS A PUBLICLY SUPPORTED ORGANIZATION UNDER IRC SECTION 170(B)(1)(A)(VI). FOR THE YEAR ENDED DECEMBER 31, 2017, THE USOC RECEIVED 35.73 PERCENT OF ITS TOTAL SUPPORT FROM PUBLIC SUPPORT, WHICH MEETS THE 33 1/3 PERCENT REQUIREMENT.</p>

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2017 Open to Public Inspection
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization UNITED STATES OLYMPIC COMMITTEE	Employer identification number 13-1548339
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$
- 3 Volunteer hours for political campaign activities (see instructions) ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ **Yes** ☐ **No****4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		202,870
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			202,870
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year	2b	
b	Carryover from last year	2c	
c	Total	3	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5	Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
LOBBYING ACTIVITIES	SCHEDULE C, PART II-B, LINE 1 THE USOC PROVIDED INFORMATION TO MEMBERS OF CONGRESS ABOUT GENERAL IMMIGRATION ISSUES SUCH AS THE IMPORTANCE OF A GLOBAL ENTRY AND OTHER TRUSTED TRAVELER PROGRAMS, THE LA 2028 OLYMPIC BID, THE CENTER FOR SAFESPORT AND THE USOC MANAGEMENT OF SEXUAL ABUSE CASES, RUSSIAN DOPING IN SOCHI AND THE IMPACT OF TAX REFORM ON THE USOC

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493243000278	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.</div>			<div>OMB No 1545-0047</div> <div>2017</div> <div>Open to Public Inspection</div>
Name of the organization UNITED STATES OLYMPIC COMMITTEE				Employer identification number 13-1548339	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1		Total number at end of year			
2		Aggregate value of contributions to (during year)			
3		Aggregate value of grants from (during year)			
4		Aggregate value at end of year			
5				Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
6				Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1 Purpose(s) of conservation easements held by the organization (check all that apply)					
<input type="checkbox"/> Preservation of land for public use (e g , recreation or education)					
<input type="checkbox"/> Preservation of an historically important land area					
<input type="checkbox"/> Protection of natural habitat					
<input type="checkbox"/> Preservation of a certified historic structure					
<input type="checkbox"/> Preservation of open space					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a				2a	
b				2b	
c				2c	
d				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4 Number of states where property subject to conservation easement is located ►					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1					
► \$					
(ii) Assets included in Form 990, Part X					
► \$ 151,679					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1					
► \$					
b Assets included in Form 990, Part X					
► \$					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
Cat No 52283D		Schedule D (Form 990) 2017			

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒ Public exhibition

b

☐ Scholarly research

c

☒ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	27,708,681	31,772,749	39,994,373	47,574,248	44,875,715
b Contributions	6,312,645	1,418,367	164,630	837,283	18,374,978
c Net investment earnings, gains, and losses	729,225	272,969	630	174,284	588,476
d Grants or scholarships	6,836,513	5,172,070	6,823,718	2,660,905	4,527,498
e Other expenditures for facilities and programs	2,428,544	583,334	1,563,166	5,930,537	11,737,423
f Administrative expenses					
g End of year balance	25,485,494	27,708,681	31,772,749	39,994,373	47,574,248

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

0 %

b

Permanent endowment

55 910 %

c

Temporarily restricted endowment

44 090 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		3,310,200		3,310,200
b Buildings		108,057,868	63,501,444	44,556,424
c Leasehold improvements		25,575,067	12,957,847	12,617,220
d Equipment		33,442,046	23,848,057	9,593,989
e Other		461,009		461,009
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				70,538,842

Schedule D (Form 990) 2017

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	0

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 13-1548339
Name: UNITED STATES OLYMPIC COMMITTEE

Supplemental Information

Return Reference	Explanation
OLYMPIC ARTIFACTS	SCHEDULE D, PART III, LINE 4 THE USOC OWNS SEVERAL OLYMPIC-THEMED PAINTINGS BY A RENOWNED PAINTER, BRONZE SCULPTURES AND OLYMPIC ARTIFACTS, WHICH HELP PRESERVE THE HISTORY OF THE OLYMPIC MOVEMENT IN THE UNITED STATES

Supplemental Information	
Return Reference	Explanation
ENDOWMENT	SCHEDULE D, PART V, LINE 4 INCOME FROM RESTRICTED FUNDS IS USED TO PROVIDE GRANTS AND SUPPORT FOR U S OLYMPICS AND PARALYMPIC ATHLETES

Supplemental Information

Return Reference	Explanation
FIN 48 (ASC 740) FOOTNOTE	SCHEDULE D, PART X, LINE 2 THE USOC IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES ON INCOME FROM ACTIVITIES RELATED TO THEIR EXEMPT PURPOSES UNDER IRC SECTION 501(A) OF THE INTERNAL REVENUE CODE (IRC) AS ORGANIZATION DESCRIBED IN IRC SECTION 501(C)(3) THE ENTITY IS ALSO A PUBLIC CHARITY UNDER IRC SECTION 509(A) THE USOC DID NOT HAVE MATERIAL AMOUNTS OF UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2017 THE COMMITTEE RECOGNIZES THE FINANCIAL STATEMENT BENEFIT OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVANT TAX AUTHORITY WOULD MORE-LIKELY-THAN-NOT SUSTAIN THE POSITION FOLLOWING AN AUDIT FOR TAX POSITIONS MEETING THE MORE-LIKELY-THAN-NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH THE RELEVANT TAX AUTHORITY

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

**Open to Public
Inspection**

Name of the organization
UNITED STATES OLYMPIC COMMITTEE

Employer identification number

13-1548339

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	1	1			16,283,702
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1	1			16,283,702

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Europe (Including Iceland and Greenland)	ANTI-DOPING SUPOORT	45,569	ELECTRONIC			
(2)									
(3)									
(4)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **1**

3 Enter total number of other organizations or entities **0**

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☒ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
MONITORING THE USE OF FOREIGN GRANTS	SCHEDULE F, PART I, LINE 2 THE USOC DOES NOT SPECIFICALLY MONITOR THE USE OF THE GRANT FUNDS DUE TO THE GENERAL NATURE OF THE GRANT, WHICH IS TO ASSIST IN ANTI-DOPING ARBITRATION

Return Reference	Explanation
ACTIVITIES PER REGION	SCHEDULE F, PART I, LINE 3 THE GRANTS TO FOREIGN ORGANIZATIONS WERE TO PROVIDE SUPPORT FOR ANTI-DOPING ARBITRATION

Additional Data

Software ID:
Software Version:
EIN: 13-1548339
Name: UNITED STATES OLYMPIC COMMITTEE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Program Services	Olympic/Paralympic Mtg	54,825
East Asia and the Pacific	0	0	Program Services	Olympic/Paralympic Mtg	4,997,789

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	0	Program Services	Olympic/Paralympic Mtg	7,335,464
Europe (Including Iceland and Greenland)	0	0	Grantmaking	Anti-doping Support	45,569

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	0	0	Program Services	Olympic/Paralympic Mtg	996,984
North America	0	0	Program Services	Olympic/Paralympic Mtg	833,289

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Russia and the Newly Independent States	0	0	Program Services	Olympic/Paralympic Mtg	74
South America	1	1	Program Services	Olympic/Paralympic Mtg	933,914

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia	0	0	Program Services	Olympic/Paralympic Mtg	3,277
Sub-Saharan Africa	0	0	Program Services	Olympic/Paralympic Mtg	85,683

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	0	0	Investments		996,834

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED STATES OLYMPIC COMMITTEE

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number
13-1548339

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 59

3 Enter total number of other organizations listed in the line 1 table 0

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) ATHLETE PERFORMANCE STIPENDS - SUPPORT TRAINING	1427	13,418,907			
(2) ELITE ATHLETE HEALTH INSURANCE/MEDICAL BENEFITS	1160	6,150,645			
(3) OPERATION GOLD - AWARDING TOP PLACE FINISHES	605	3,156,625			
(4) TUITION AND CAREER ASSISTANCE	294	1,532,076			
(5) ELITE ATHLETE HEALTH NTL MEDICAL NETWORK	772	3,384,808			
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS	SCHEDULE I, PART I, LINE 2 USOC GRANT FUNDS ARE AWARDED TO INDIVIDUAL SPORTS THROUGH EACH NATIONAL GOVERNING BODIES (NGBS) AND ARE AGREED UPON AND ADMINISTERED THROUGH A PERFORMANCE PARTNERSHIP AGREEMENT (PPA) THE APPROVED PROJECTS FOR ELITE ATHLETE TRAINING ARE OUTLINED AND AGREED UPON IN THE PPA NGBS RECEIVE PAYMENTS FROM THE USOC ON A QUARTERLY BASIS PRIOR TO RELEASING FUNDS, NGBS ARE REQUIRED TO PROVIDE A QUARTERLY REPORT OUTLINING THE AMOUNT OF DOLLARS SPENT ON EACH OF THE USOC-APPROVED TRAINING PROJECTS AT THE END OF THE YEAR, NGBS ARE REQUIRED TO PROVIDE A FINAL REPORT ON EACH OF THE USOC-APPROVED PROJECTS THE NGBS ARE THEN PERIODICALLY AUDITED BY THE USOC AUDIT DIVISION ATHLETE PERFORMANCE GRANTS PROGRAM IS ALSO AGREED UPON AND ADMINISTERED THROUGH THE PPA THE PAYMENT SCHEDULE FOR ATHLETES IS OUTLINED IN THE PPA AS WELL AND TYPICALLY THE PAYMENTS ARE EITHER MONTHLY OR QUARTERLY THE NGB SUBMITS THE ATHLETE DESIGNATION LIST AND A SIGNED (BY THE ATHLETE) ATHLETE SUPPORT DESIGNEE FORM BEFORE THE USOC WILL BEGIN THE PROCESS FOR ATHLETE PAYMENTS PRIOR TO PAYMENTS BEING MADE TO AN ATHLETE, THE USOC CONFIRMS THAT THE ATHLETE IS COMPLIANT WITH ANTI-DOPING REQUIREMENTS ONCE COMPLIANCE IS CONFIRMED, THE ATHLETE WILL THEN BE PAID THERE IS NO REPORTING REQUIREMENT FOR ATHLETES OTHER THAN MAINTAINING THEIR STATUS IN THEIR SPORT

Additional Data

Software ID:
Software Version:
EIN: 13-1548339
Name: UNITED STATES OLYMPIC COMMITTEE

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADAPTIVE SPORTS NEW ENGLAND INC 89 SOUTH STREET SUITE 603 BOSTON, MA 02111	46-3900833	501(c)(3)	15,000	0			OLYMPIC/PARALYMPIC
AMATEUR SOFTBALL ASSOCIATION OF AMERICA 2801 NE 50th STREET OKLAHOMA CITY, OK 73111	23-7132249	501(c)(3)	473,252	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA AMERICAN CANOE ASSOCIATION 503 SOPHIA ST FREDERICKSBURG, VA 22401	84-0619411	501(c)(3)	75,000	0			OLYMPIC/PARALYMPIC
USA ARCHERY 4065 SINTON RD COLORADO SPRINGS, CO 80907	36-6118407	501(c)(3)	918,753	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN VALLEY SKISNOWBOARD CLUB 300 AVSC DR ASPEN, CO 81611	84-6042225	501(c)(3)	60,000	0			OLYMPIC/PARALYMPIC
US BADMINTON ASSOCIATION 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	84-1474714	501(c)(3)	143,712	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA BASKETBALL 27 S Tejon St COLORADO SPRINGS, CO 80903	37-0996441	501(c)(3)	1,027,823	0			OLYMPIC/PARALYMPIC
US BIATHLON ASSOCIATION 49 PINELAND DR NEW GLOUCESTER, ME 04260	03-0279959	501(c)(3)	1,020,646	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA BOBSLED & SKELETON FEDERATION 1631 MESA AVE COLORADO SPRINGS, CO 80906	16-1172380	501(c)(3)	2,352,041	0			OLYMPIC/PARALYMPIC
USA BOXING FEDERATION 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	31-1012361	501(c)(3)	756,774	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROADMOOR WORLD ARENA 3185 VENETUCCI COLORADO SPRINGS, CO 80906	84-1264465	501(c)(3)	5,800	0			OLYMPIC/PARALYMPIC
USA CANOE & KAYAK TEAM 725 S LINCOLN OKLAHOMA CITY, OK 73129	36-3332979	501(c)(3)	50,752	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA CURLING 5525 CLEMS WAY STEVENS POINT, WI 54481	36-6066248	501(c)(3)	1,014,321	0			OLYMPIC/PARALYMPIC
USA CYCLING 210 USA CYCLING COLORADO SPRINGS, CO 80919	84-1284437	501(c)(3)	1,344,963	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES DIVING INC 132 E WASHINGTON INDIANAPOLIS, IN 46204	31-0986868	501(c)(3)	1,040,470	0			OLYMPIC/PARALYMPIC
DIXIE WHEELCHAIR ATHLETIC ASSOCIATION 7207 CHESHIRE CT HUDSON, FL 34667	58-1284621	501(c)(3)	12,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELITE ATHLETE SERVICES LLC 2800 OLYMPIC PARKWAY CHULA VISTA, CA 91915	61-1795365	501(c)(3)	8,350	0			OLYMPIC/PARALYMPIC
UNITED STATES EQUESTRIAN FEDERATION 4047 IRON WORKS PKWY LEXINGTON, KY 40511	56-2350714	501(c)(3)	1,258,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US FENCING ASSOCIATION 4065 SINTON RD COLORADO SPRINGS, CO 80907	11-6075952	501(c)(3)	965,524	0			OLYMPIC/PARALYMPIC
US FIELD HOCKEY ASSOCIATION 711 N TEJON COLORADO SPRINGS, CO 80903	23-6299893	501(c)(3)	881,957	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US FIGURE SKATING ASSOCIATION 20 FIRST STREET COLORADO SPRINGS, CO 80906	84-0768715	501(c)(3)	1,099,346	0			OLYMPIC/PARALYMPIC
USA GOLF FEDERATION INC PO Box 1065 POINT VEDRA BEACH, FL 32004	45-4319643	501(c)(3)	28,400	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA GYMNASTICS 132 E WASHINGTON INDIANAPOLIS, IN 46204	75-1847871	501(c)(3)	2,303,317	0			OLYMPIC/PARALYMPIC
USA HOCKEY INC 1775 BOB JOHNSON COLORADO SPRINGS, CO 80906	51-0204742	501(c)(3)	2,076,720	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Harris County Houston Sports Authority 1331 LAMAR ST STE 700 HOUSTON, TX 77010	76-0548093	City of Houston	10,000	0			OLYMPIC/PARALYMPIC
UNITED STATES JUDO INC 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	74-2160691	501(c)(3)	747,210	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA NATIONAL KARATE DO FEDERATION 1631 MESA AVE COLORADO SPRINGS, CO 80906	91-1646543	501(c)(3)	130,638	0			OLYMPIC/PARALYMPIC
LAKESHORE FOUNDATION 4000 RIDGEWAY DR BIRMINGHAM, AL 35209	63-0288847	501(c)(3)	335,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES LUGE ASSOCIATION INC 57 CHURCH ST LAKE PLACID, NY 12946	14-1638206	501(c)(3)	975,625	0			OLYMPIC/PARALYMPIC
NATIONAL WHEELCHAIR BASKETBALL ASSOCIATION 1130 ELKTON ST COLORADO SPRINGS, CO 80907	36-2884730	501(c)(3)	300,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLYMPIANS FOR OLYMPIANS RELIEF FUND 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	84-1497252	501(c)(3)	25,000	0			OLYMPIC/PARALYMPIC
PARTNERSHIP FOR CLEAN COMPETITION 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	42-1763805	501(c)(3)	750,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA PENTATHLON INC 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	26-3563446	501(c)(3)	265,773	0			OLYMPIC/PARALYMPIC
US RACQUETBALL ASSOCIATION 1586 W UINTAH COLORADO SPRINGS, CO 80904	73-0954204	501(c)(3)	52,721	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA ROLLER SPORTS 4730 SOUTH STREET LINCOLN, NE 68506	47-0550989	501(c)(3)	57,608	0			OLYMPIC/PARALYMPIC
US ROWING ASSOCIATION 2 WALL STREET PRINCETON, NJ 08450	23-6275472	501(c)(3)	1,794,464	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA RUGBY 2500 ARAPAHOE AVE BOULDER, CO 80302	16-1118870	501(c)(3)	925,000	0			OLYMPIC/PARALYMPIC
RYAN MARTIN FOUNDATION PO BOX 1161 SIMSBURY, CT 06070	45-2647478	501(c)(3)	30,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US SAILING ASSOCIATION 15 MARITIME DR PORTSMOOUTH, RI 02871	13-1671529	501(c)(3)	1,125,427	0			OLYMPIC/PARALYMPIC
USA SHOOTING 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	84-1263863	501(c)(3)	1,874,971	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US SKI & SNOWBOARD ASSOCIATION 1 VICTORY LANE PARK CITY, UT 84060	87-0480724	501(c)(3)	6,203,543	0			OLYMPIC/PARALYMPIC
US SOCCER FEDERATION 1801 S PRAIRIE AVE CHICAGO, IL 60616	13-5591991	501(c)(3)	750,000	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US SPEEDSKATING ASSOCIATION 5662 S COUGAR LANE KEARNS, UT 84118	43-6065836	501(c)(3)	2,695,767	0			OLYMPIC/PARALYMPIC
US SURFING 1001 AVENIDA PICO SAN CLEMENTE, CA 92673	81-4742350	501(c)(3)	9,102	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US SWIMMING 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	31-0981848	501(c)(3)	3,444,582	0			OLYMPIC/PARALYMPIC
US SYNCHRONIZED SWIMMING 132 E WASHINGTON INDIANAPOLIS, IN 46225	31-0994560	501(c)(3)	212,204	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA TABLE TENNIS 4065 SINTON RD COLORADO SPRINGS, CO 80907	51-6016365	501(c)(3)	255,242	0			OLYMPIC/PARALYMPIC
USA TAEKWONDO 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	52-1194967	501(c)(3)	509,928	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAHOE ADAPTIVE COMPETITION CENTER 1461 MT RAINIER SOUTH LAKE TAHOE, CA 96150	46-1094506	501(c)(3)	15,000	0			OLYMPIC/PARALYMPIC
USA TEAM HANDBALL PO BOX 581486 SALT LAKE CITY, UT 84158	20-2179012	501(c)(3)	81,040	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA TRACK & FIELD 132 E WASHINGTON INDIANAPOLIS, IN 46204	35-1475463	501(c)(3)	3,914,025	0			OLYMPIC/PARALYMPIC
USA TRIATHLON 5825 DELMONICO COLORADO SPRINGS, CO 80919	68-0047940	501(c)(3)	1,127,775	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US CENTER FOR SAFESPORT 1385 S Colorado Blvd STE A-706 Denver, CO 80222	47-2475870	501(c)(3)	2,712,800	0			OLYMPIC/PARALYMPIC
US ASSOCIATION FOR BLIND ATHLETES 33 N INSTITUTE COLORADO SPRINGS, CO 80903	31-0977121	501(c)(3)	198,500	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTAH ATHLETIC FOUNDATION 5662 SOUTH COUGAR LAND KEARNS, UT 84118	84-1367913	501(c)(3)	7,700	0			OLYMPIC/PARALYMPIC
USA VOLLEYBALL ASSOCIATION 4065 SINTON RD COLORADO SPRINGS, CO 80907	80-0551967	501(c)(3)	1,933,797	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US WATER POLO 2124 S MAIN ST HUNTINGTON BEACH, CA 92648	84-1357609	501(c)(3)	1,290,149	0			OLYMPIC/PARALYMPIC
USA WEIGHTLIFTING 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	31-1012362	501(c)(3)	279,684	0			OLYMPIC/PARALYMPIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USA WRESTLING 6155 LEHMAN DR COLORADO SPRINGS, CO 80918	36-2667348	501(c)(3)	1,595,866	0			OLYMPIC/PARALYMPIC

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
UNITED STATES OLYMPIC COMMITTEE

Employer identification number

13-1548339

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

1b Yes

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

2 Yes

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

4a No

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

4b No

c Participate in, or receive payment from, an equity-based compensation arrangement?

4c No

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

5a No

b Any related organization?

5b No

If "Yes," on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

6a No

b Any related organization?

6b No

If "Yes," on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

7 Yes

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

8 No

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

See Additional Data Table

Schedule J (Form 990) 2017

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
FIRST CLASS OR CHARTER TRAVEL AND TRAVEL FOR COMPANIONS	SCHEDULE J, PART I, LINE 1a THE CEO MAY FLY BUSINESS OR FIRST CLASS AT HIS DISCRETION ON DOMESTIC AND INTERNATIONAL FLIGHTS. MANAGING DIRECTORS AND ABOVE MAY FLY BUSINESS CLASS AT THEIR DISCRETION ON FLIGHTS WITH SEGMENTS OF FIVE HOURS OR MORE IN DURATION. THE USOC DETERMINED THAT IT IS SOMETIMES BENEFICIAL FOR THE CEO AND BOARD MEMBERS TO HAVE THEIR SPOUSES ACCOMPANY THEM TO PARTICULAR EVENTS, SUCH AS THE OLYMPIC GAMES. IN SUCH CASES THAT EXPENSES ARE PAID BY THE USOC, THE COSTS ASSOCIATED WITH THE SPOUSES' TRAVEL ARE EVALUATED FOR BUSINESS PURPOSE. THOSE DETERMINED NOT TO BE NECESSARY BUSINESS EXPENSES ARE REPORTED TO THE CEO AND BOARD MEMBERS AS TAXABLE WAGES OR NON-EMPLOYEE COMPENSATION ON EITHER FORM W-2 OR 1099-MISC. DURING 2017, THE USOC HAD NO SPOUSAL TRAVEL EXPENSES.
NONFIXED PAYMENTS	SCHEDULE J, PART I, LINE 7 THE COMPENSATION PRACTICE OF THE USOC IS THAT BASE PAY PLUS AT-RISK BONUS IS THE TOTAL CASH COMPENSATION FOR ALL REGULAR FULL-TIME AND PART-TIME EXEMPT POSITIONS. AT-RISK BONUS COMPENSATION IS BASED UPON A COMBINATION OF ORGANIZATIONAL AND INDIVIDUAL GOAL ACHIEVEMENT. THE COMPENSATION COMMITTEE OF THE USOC'S BOARD OF DIRECTORS DETERMINES THE ORGANIZATIONAL ACHIEVEMENT BY USING A PERFORMANCE SCREEN THAT IDENTIFIES AND QUANTIFIES ANNUAL GOALS AND OBJECTIVES FOR THE ORGANIZATION. ONE OF THOSE GOALS IS MEETING THE BOARD-APPROVED ANNUAL BUDGET. THE COMPENSATION COMMITTEE OF THE USOC'S BOARD OF DIRECTORS DETERMINES THE ACHIEVEMENT OF THESE GOALS OVER THE COURSE OF THE YEAR AND, AT YEAR END, EXPRESSES THEM AS A PERCENTAGE OF THE GOALS. ONCE THAT PERCENTAGE IS DETERMINED, IT IS APPLIED ACROSS THE ORGANIZATION IN A CONSISTENT FORMULA TO ELIGIBLE EXEMPT EMPLOYEES, WHOSE ELIGIBILITY IS BASED UPON AN INDIVIDUAL'S OVERALL PERFORMANCE AND CONTRIBUTIONS FOR THE YEAR.
FORMER OFFICER COMPENSATED BY RELATED ORGANIZATION	SCHEDULE J, PART II WALTER R. GLOVER WAS THE CHIEF FINANCIAL OFFICER AT THE USOC DURING 2016, AFTER WHICH HIS EMPLOYMENT ENDED. HE THEN BEGAN EMPLOYMENT WITH THE USOE, A RELATED ORGANIZATION AS DISCLOSED IN SCHEDULE R. BECAUSE OF WALTER'S ROLE AS AN OFFICER OF THE USOC DURING PART OF 2016, THE IRS REQUIRES COMPENSATION FROM THE USOE TO BE REPORTED IN SCHEDULE J, PART II AND PART VII. ALTHOUGH THE USOE IS A RELATED ORGANIZATION, IT OPERATES INDEPENDENTLY WITH A SEPARATE BOARD AND MANAGEMENT. THE USOC DOES NOT PROVIDE INPUT INTO ITS STAFFING AND COMPENSATION MATTERS.

Additional Data

Software ID:
Software Version:
EIN: 13-1548339
Name: UNITED STATES OLYMPIC COMMITTEE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1SCOTT A BLACKMUN CHIEF EXECUTIVE OFFICER	(i)	675,975	610,783	22,356	20,250	28,848	1,358,212	0
	(ii)	0	0	0	0	0	0	0
1MORANE B KEREK CHIEF FINANCIAL OFFICER	(i)	225,284	71,381	330	17,507	24,692	339,194	0
	(ii)	0	0	0	0	0	0	0
2CHRISTOPHER D MCCLEARY GENERAL COUNSEL	(i)	316,626	98,092	0	14,850	22,422	451,990	0
	(ii)	0	0	0	0	0	0	0
3RICHARD W ADAMS CHIEF OF PARALYMPICS & NGB	(i)	275,399	87,244	641	20,250	22,814	406,348	0
	(ii)	0	0	0	0	0	0	0
4ALAN R ASHLEY CHIEF SPORT PERFORMANCE	(i)	355,542	344,834	19,668	20,250	16,439	756,733	0
	(ii)	0	0	0	0	0	0	0
5LISA P BAIRD CHIEF MARKETING OFFICER	(i)	405,213	134,954	19,999	20,250	29,746	610,162	0
	(ii)	0	0	0	0	0	0	0
6JON M DENNEY CHIEF DEVELOPMENT OFFICER	(i)	379,055	175,000	921	14,850	20,689	590,515	0
	(ii)	0	0	0	0	0	0	0
7KEVIN E PENN CHIEF OF BUSINESS OPERATIONS	(i)	296,498	72,914	457	7,728	23,132	400,729	0
	(ii)	0	0	0	0	0	0	0
8PATRICK D SANDUSKY CHIEF COMMUNICATIONS	(i)	290,357	98,726	18,319	20,250	23,335	450,987	0
	(ii)	0	0	0	0	0	0	0
9MITCHELL POLL SVP, PARTNERSHIP MARKETING	(i)	247,098	65,061	565	19,053	23,135	354,912	0
	(ii)	0	0	0	0	0	0	0
10CHRISTINE V WALSHE VP, PRINCIPAL & MAJOR GIFTS	(i)	220,080	57,741	15,431	17,648	728	311,628	0
	(ii)	0	0	0	0	0	0	0
11DESIREE G FILIPPONE MNG DIR GOV'T RELATIONS	(i)	233,118	59,196	0	17,484	404	310,202	0
	(ii)	0	0	0	0	0	0	0
12PETER C ZEYTOONJIAN SVP, MARKETING	(i)	210,684	58,797	18,498	17,233	6,748	311,960	0
	(ii)	0	0	0	0	0	0	0
13WALTER R GLOVER END 116 FORMER CHIEF FINANCIAL OFFICER	(i)	0	0	0	0	0	0	0
	(ii)	105,856	0	0	0	7,402	113,258	0
14RUSSELL C HUEBNER FORMER CHIEF OF PARALYMPICS	(i)	225,110	62,499	5,243	15,434	23,001	331,287	0
	(ii)	0	0	0	0	0	0	0

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SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047
2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization
UNITED STATES OLYMPIC COMMITTEE

Employer identification number
13-1548339

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	2	325,132	COST OR SALES PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	1	7,880	OTHER
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (EQUIPMENT)	X	1	4,099	COST OR SALES PRICE
26 Other ► (VEHICLE USE)	X	1	1,000	COST OR SALES PRICE
27 Other ► (TRANSPORTATION)	X	1	425	COST OR SALES PRICE
28 Other ► (ELECTRIC BIKE)	X	1	3,900	OTHER
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29			
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?				
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?				
b If "Yes," describe in Part II				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

29

30a

31

32a

Yes

No

Yes

No

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 51227J

Schedule M (Form 990) (2017)

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
NUMBER OF CONTRIBUTIONS	SCHEDULE M, PART I, COLUMN B THE NUMBERS LISTED IN PART I, COLUMN B, REFLECT THE NUMBER OF CONTRIBUTIONS FOR EACH ITEM
REPORTING PLEDGES	SCHEDULE M, PART I, LINE 33 THE USOC OCCASIONALLY RECEIVES PAYMENT ON PLEDGE COMMITMENTS FROM DONORS IN THE FORM OF PUBLICLY TRADED SECURITIES THE USOC RECORDS CONTRIBUTION REVENUE FROM PLEDGES WHEN THE PLEDGE IS UNCONDITIONALLY MADE AS A RESULT, IT COULD BE THE CASE THAT PLEDGE PAYMENTS VIA GIFTS OF PUBLICLY TRADED SECURITIES ARE NOT RECORDED IN CURRENT YEAR CONTRIBUTION REVENUE, AS SOME PAYMENTS MAY ALREADY HAVE BEEN RECOGNIZED AS CONTRIBUTION REVENUE IN A PRIOR YEAR WHEN THE RELATED PLEDGE WAS MADE

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

UNITED STATES OLYMPIC COMMITTEE

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

13-1548339

990 Schedule O, Supplemental Information

Return Reference	Explanation
OTHER PROGRAM SERVICES	<p>FORM 990, PART III, LINE 4D NATIONAL GOVERNING BODIES (NGBS) & ATHLETE FOUNDATIONAL PROGRAMS - ADDITIONAL PROGRAMMING AND SUPPORTING SERVICES ARE DEDICATED TO THE SUCCESSFUL OPERATION OF NGBS AND PARTICIPATION OF ATHLETES THIS INCLUDES SAFE SPORT AND ANTI-DOPING CONTRIBUTIONS, AS WELL AS CAREER AND EDUCATION ASSISTANCE, ALUMNI RELATIONS, OMBUDSMAN SERVICES, NGB ORGANIZATIONAL SUPPORT, DIVERSITY & INCLUSION PROGRAMMING, AND COLLEGIATE PARTNERSHIP S COUNCIL EXPENSES \$ 18,804,294 INCLUDING GRANTS OF \$7,356,811 REVENUE \$1,498,980 OLYMPIC & PARALYMPIC COMPETITIONS - THE USOC PROVIDES LOGISTICAL AND ORGANIZATIONAL SUPPORT FOR ATHLETE PERFORMANCE AT THE OLYMPIC AND PARALYMPIC GAMES, PAN AND PARAPAN AMERICAN GAMES, AND YOUTH OLYMPIC GAMES THIS INCLUDES TRAVEL AND OUTFITTING, ON-THE-GROUND STAFFING AND SUPPORT, AS WELL AS HIGH PERFORMANCE TRAINING CENTERS EXPENSES 3,244,083 INCLUDING GRANTS OF \$ 0 REVENUE \$ 3,340</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
VOTING MEMBERS	FORM 990, PART VI, SECTION A, LINE 1 MEMBERS OF THE USOC BOARD WHO ALSO SERVE ON THE INTERNATIONAL OLYMPIC COMMITTEE'S (IOC) BOARD OF DIRECTORS ARE ALLOCATED ONE VOTE AND ALL OTHER MEMBERS ARE ALLOCATED A NUMBER OF VOTES EQUAL TO THE NUMBER OF MEMBERS ALSO SERVING ON THE INTERNATIONAL OLYMPIC COMMITTEE AT THE END OF 2017, THERE WERE THREE MEMBERS OF THE BOARD WHO ALSO SERVED ON THE IOC BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
UPDATED BYLAWS	FORM 990, PART VI, SECTION A, LINE 4 IN 2017, THE USOC AMENDED ITS BYLAWS TO 1) UPDATE SECTION 5 4 3 TO ADD THE FOLLOWING RESPONSIBILITIES TO THE COMPENSATION COMMITTEE, A) COMMUNICATE PERFORMANCE FEEDBACK TO THE CEO FOLLOWING THE CEO'S EVALUATION PROCESS AND B) TO MANAGE THE INITIATION AND COMMUNICATION OF THE CEO'S EMPLOYMENT CONTRACT TERMS AND RENEWAL, SUBJECT TO BOARD APPROVAL AND TO 2) AMEND SECTION 19 OF THE BYLAWS TO SLIGHTLY RESTATE THE COMPOSITION AND OPERATION OF THE USOC GAMES ADMINISTRATIVE BOARD, AND TO CREATE A COUNTERPART TRIALS ADMINISTRATIVE BOARD THAT WOULD BE COMPOSED AND OPERATE IN THE SAME WAY AS THE GAMES ADMINISTRATIVE BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 REVIEW	FORM 990, PART VI, SECTION B, LINE 11B A COMPLETE COPY OF THE USOC FORM 990 WILL BE PROVIDED TO THE AUDIT COMMITTEE THE CFO WILL MEET OR CONDUCT A CONFERENCE CALL WITH THE AUDIT COMMITTEE TO DISCUSS ANY ISSUES OR CONCERNS THE CFO WILL TAKE IMMEDIATE ACTION TO RESOLVE ANY OUTSTANDING ISSUES RAISED BY THE AUDIT COMMITTEE THE AUDIT COMMITTEE WILL FORMALLY APPROVE THE FORM 990 AND A COMPLETE COPY IS THEN SENT TO THE USOC BOARD OF DIRECTORS PRIOR TO IT BEING FILED WITH THE INTERNAL REVENUE SERVICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12C THE USOC OBTAINS ANNUAL CERTIFICATIONS FROM THE ORGANIZATION'S STAFF, BOARD OF DIRECTORS, AND COMMITTEE MEMBERS THE ETHICS OFFICER REVIEWS THE COMPLETED DISCLOSURE STATEMENTS AND PROVIDES COPIES TO THE CHAIR OF THE ETHICS COMMITTEE THE CHAIR OF THE ETHICS COMMITTEE HAS THE DISCRETION TO SHARE THE DISCLOSURE STATEMENTS WITH THE ENTIRE ETHICS COMMITTEE, BOARD OF DIRECTORS AND/OR CEO THE ETHICS OFFICER AND THE CHAIR OF THE ETHICS COMMITTEE, IN SOME CASES IN CONSULTATION WITH THE ENTIRE ETHICS COMMITTEE, DETERMINE IN EACH CASE WHETHER A CONFLICT EXISTS AND SO RECORD THEIR DECISION IN CONNECTION WITH EACH RELEVANT DISCLOSURE STATEMENT, ALSO INDICATING ANY REQUIRED CORRECTIVE ACTION (WHICH MAY INCLUDE, BUT IS NOT LIMITED TO, PROHIBITING THE PERSON FROM PARTICIPATION IN THE ORGANIZATION'S DELIBERATIONS AND DECISIONS IN AN AFFECTED TRANSACTION)

990 Schedule O, Supplemental Information

Return Reference	Explanation
ALL EMPLOYEE COMPENSATION	<p>FORM 990, PART VI, SECTION B, LINES 15A/15B AS PART OF DETERMINING THE CEO, OFFICER, AND KEY EMPLOYEES' COMPENSATION, THE USOC USES COMPARABILITY DATA FROM INDEPENDENT SALARY SURVEY DATA TO PRESENT COMPENSATION AMOUNTS AND POLICIES TO AN INDEPENDENT COMPENSATION COMMITTEE AND MANAGEMENT FOR APPROVAL. THE DISCUSSIONS ABOUT COMPENSATION STRATEGIES AND KEY PROGRAMS ARE CONTEMPORANEOUSLY DOCUMENTED, AND DECISIONS ABOUT COMPENSATION AND BENEFITS ARE MADE BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS IN STRICT ACCORDANCE WITH THE BYLAWS OF THE ORGANIZATION. THE USOC SPECIFICALLY PERFORMS THE FOLLOWING STEPS IN DETERMINING COMPENSATION OF ALL EMPLOYEES (INCLUDING OFFICERS AND KEY EMPLOYEES) AS WELL AS THE CEO'S COMPENSATION PACKAGE: THE USOC HAS AN ESTABLISHED SALARY STRUCTURE CONSISTING OF 40+ OVERLAPPING, SYMMETRICAL SALARY RANGES FOR EXEMPT AND NON-EXEMPT POSITIONS. EACH RANGE INCLUDES A MINIMUM, MIDPOINT AND MAXIMUM PAY LEVEL. THE SALARY RANGES HAVE BEEN DEVELOPED BY BLENDING OUR COMPENSATION PHILOSOPHY, NATIONALLY AND REGIONALLY AVAILABLE INDEPENDENT SALARY SURVEY DATA AND ECONOMIC BUSINESS CONDITIONS DATA. A JOB DESCRIPTION AND PAY GRADE FOR EACH JOB TITLE IS ESTABLISHED IN COLLABORATION WITH THE SUPERVISOR OF THE POSITION AND WITH FINAL APPROVAL BY HUMAN RESOURCES. FINAL DETERMINATION OF THE PAY GRADE MAY ALSO TAKE INTO ACCOUNT AVAILABLE DATA REGARDING SALARIES PAID FOR SIMILAR JOBS IN THE MARKETPLACE AS WELL AS INTERNAL EQUITY CONSIDERATIONS. ALL FULL-TIME AND PART-TIME REGULAR EMPLOYEES ARE ELIGIBLE FOR ANNUAL MERIT INCREASES BASED UPON PERFORMANCE. THE APPROVED MERIT POOL FOR ALL EMPLOYEES IS APPROVED BY THE COMPENSATION COMMITTEE OF THE USOC BOARD OF DIRECTORS BASED ON COMPENSATION PHILOSOPHY, NATIONALLY AVAILABLE INDEPENDENT SALARY SURVEY DATA, ECONOMIC BUSINESS CONDITIONS DATA AND THE RECOMMENDATIONS OF MANAGEMENT. ALL FULL-TIME AND PART-TIME REGULAR EXEMPT EMPLOYEES ARE ELIGIBLE FOR AT-RISK BONUS COMPENSATION BASED UPON ORGANIZATIONAL GOAL ATTAINMENT AS DETERMINED BY THE COMPENSATION COMMITTEE OF THE USOC BOARD OF DIRECTORS AND INDIVIDUAL GOAL ATTAINMENT. THE FUNDING BUDGET OF THE AT-RISK BONUS IS ALSO REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE. THE CEO'S MERIT INCREASES AND AT-RISK COMPENSATION ARE DETERMINED BY THE COMPENSATION COMMITTEE USING PROCESSES SIMILAR TO THOSE DESCRIBED ABOVE FOR ALL EMPLOYEES. THE COMPENSATION COMMITTEE THEN PROVIDES A WRITTEN CONFIRMATION OF THE PROCESS AND OUTCOME TO HUMAN RESOURCES AND FINANCE FOR DOCUMENTATION AND AUDIT PURPOSES.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
PUBLIC DISCLOSURE	FORM 990, PART VI, SECTION C, LINE 19 UNITED STATES OLYMPIC COMMITTEE'S BYLAWS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS, ALONG WITH THE CODE OF CONDUCT AND ANNUAL REPORT, CAN BE FOUND AT TEAMUSA.ORG

990 Schedule O, Supplemental Information

Return Reference	Explanation
COMPENSATION	FORM 990, PART VII, SECTION A, LINE 1A RUSSELL C HUEBNER IS INCLUDED ON PART VII, SECTION A, LINE 1A AS A FORMER KEY EMPLOYEE BECAUSE OF HIS PREVIOUS ROLE AS CHIEF OF PARALYMPICS THE COMPENSATION REPORTED IS FOR HIS CURRENT ROLE AS VP OF DEVELOPMENT, WHICH IS NOT A KEY EMPLOYEE POSITION

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
UNITED STATES OLYMPIC COMMITTEE

Employer identification number
13-1548339

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)UNITED STATES OLYMPIC ENDOWMENT 10 LAKE CIRCLE COLORADO SPRINGS, CO 80906 74-2327838	ENDOWMENT	CO	501(C)(3)	12-I	NA		No
(2)UNITED STATES OLYMPIC AND PARALYMPIC FDN 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909 80-0939841	FUNDRAISING	CO	501(C)(3)	7	USOC	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) USOC HOSPITALITY SERVICOS COMERCIO AVENIDA VIEIRA SOUTO NO 22 IPANEMA CEP BR	PROMOTE OLYMPICS	BR	USOC	C CORP	0	0	99.230 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)	Yes	
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNITED STATES OLYMPIC AND PARALYMPIC FDN	B	11,050,832	FAIR VALUE
(2) UNITED STATES OLYMPIC AND PARALYMPIC FDN	C	5,337,940	FAIR VALUE
(3) UNITED STATES OLYMPIC AND PARALYMPIC FDN	L	5,851,691	FAIR VALUE
(4) UNITED STATES OLYMPIC AND PARALYMPIC FDN	N	1,080,416	FAIR VALUE
(5) UNITED STATES OLYMPIC AND PARALYMPIC FDN	Q	10,400,000	FAIR VALUE

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
AGREEMENT WITH THE UNITED STATES OLYMPIC AND PARALYMPIC FOUNDATION	SCHEDULE R, PART II, LINE 2 THE USOC ENTERED INTO A SERVICE AGREEMENT WITH THE USOPF FOR THE PURPOSES OF PROVIDING THE USE OF CERTAIN SERVICES, PERSONNEL, ASSETS AND FACILITIES, AND THE LIMITED RIGHT TO LICENSE AND USE CERTAIN INTELLECTUAL PROPERTY OF THE USOC, IN ORDER TO ASSIST AND/OR FACILITATE THE USOPF IN THE PERFORMANCE OF ITS FUNDRAISING MISSION, ON BEHALF OF THE USOC, IN THE MOST EFFECTIVE AND EFFICIENT MANNER SCHEDULE R, PART V, LINE 1B THE USOC ALSO HAS AN AGREEMENT WITH THE USOPF TO PROVIDE A GRANT TO THE USOPF TO BE USED BY THE USOPF EXCLUSIVELY FOR ITS OWN ADMINISTRATIVE AND FUNDRAISING EXPENSES

